

Incident Report

Print Date/Time: 08/30/2016 08:08

Login ID: ss0100

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00016828

Incident Date/Time: 8/25/2016 12:37:15 PM

Location: SR 9 NE / SR 204

LAKE STEVENS WA 98258

Phone Number: (425) 263-7688

Report Required: Yes
Prior Hazards: No
LE Case Number:

Source: Priority:

Priority: 3F Status: 3 Nature of Call:

Collision

911

Lake Stevens

Incident Type:

(425) 530-6077

Venue:

Unit/Personnel

Unit Personnel

 19D2
 SS0127-Adams

 19D3
 SS0130-Rutherford

 19R1
 SS0131-Wells

Person(s)

No. Role Name Address Phone Race Sex DOB

1 Reporting Party VERIZON

2 Reporting Party AMBER (425) 263-7688

Vehicle(s)

Role Type Year Make Model Color License State

Disposition(s)

Disposition Count

R 1

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

08/25/2016: 13:04:54 ss0130 Narrative: top notch towing took subaru to their yard

08/25/2016: 13:00:15 SP0224 Narrative: TOW ADV'D TO CXL

08/25/2016: 12:55:07 SP0224 Narrative: REOING TOW

08/25/2016: 12:55:02 SP0224 Narrative: 204/9 FEM PAIN TO KNEE

08/25/2016: 12:50:20 ss0130 Narrative: driver 1 leeson, catherine e 07/10/89, aka5036, geico 4291168088.

driver 2, beck, jack b 06/1051, atb6088, personal lines ins 55phj739513355816

08/25/2016 : 12:44:10 SP0224 Narrative: CL 19D2 SHUTTING SR 9 NB FROM 204 ..AIDS BEEN ADV'D

08/25/2016: 12:39:45 SP0224 Narrative: ***AID FOR NECK PAIN 30 YO FEM CABN

08/25/2016: 12:38:46 sp0257 Narrative: RP SEES OFCR, LR257

08/25/2016: 12:38:14 sp0257 Narrative: AC, 2 VEHS, NON INJ, BLOCKING, BLK SUBARU VS GRN HONDA PILOT

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E577804	2 3 27							
	COLLISION REPORT 1591971 CASE # 2016-00016828								
1 4	STATE ROUTE OTHER OTHER LOCAL AGENCY CODING								
2 1	COUNTY RD PRIVATE WAY INVOLVED TOTAL # OF COUNTY RD OBJECT	1 8 28							
<u></u>	THIBAL RESERVATION M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#								
<u>"</u>	DATE OF COLLISION 08 - 25 - 2016 1237 31 S W OF W 0664 3								
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION V NON-INTERSECTION BLOCK NO.	0 1 29							
4a	DISTANCE OF (REFERENCE OR CROSS STREET)								
5	MILES N E STATE ROUTE 204								
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET YES NO	0 1 30							
6 1	LAST NAME LEESON FIRST NAME CATHERINE MIDDLE INITIAL E								
	STREET NEW ADDRESS 8017 1ST STREET SE								
7	CITY LAKE STEVENS ST WA ZIP 98258	1 2 31							
8	CDL RESTRICTIONS ENDORSEMENTS 2								
9 1	DRIVER'S LICENSE # LEESOCE117MS STATE WA SEX F D.O.B. MMDDYYYY 07 _ 10 _ 1989	1 2 32							
10 1	ON DUTY STATUS AIRBAG 3 RESTR. 9 EJECT 1 HELMET USE TO INJURY 7 INJURY 7 INJURY 7 INJURY 7 INJURY 7 INJURY 7 INJURY 6 INJURIES KNEE PAIN	32							
11 4 0	LICENSE PLATE # AKA5036 STATE WA VIN# JF2SHADCXDH411622								
12 4 0	TRAILER PLATE # STATE TRAILER PLATE # STATE								
13 4	ZUI3 SUBA FORESI SV YES NOV YES NOV	7 3 33							
14 4	LABILITY INSURANCE 7 INSURANCE CO GEICO (201169099	FROM TO 34							
15 1	VEHICLE YES NO CITATION # CHARGE CHARGE CHARGE	34							
16 1	UNIT UZ VEHICLE L CYCLE	4 35							
	LAST NAME BECK FIRST NAME JACK MIDDLE INITIAL B	4 36							
17	STREET NEW ADDRESS 17393 JOHNSON ROAD NW	37							
18	CITY EPHRATA ST WA ZIP 98823	38							
19	CDL RESTRICTIONS ENDORSEMENTS	39							
20	DRIVER'S LICENSE # BECK*JB497LS STATE WA SEX M D.O.B. MDDVYYY 06 - 10 - 1951								
21	ON DUTY STATUS AIRBAG 2 RESTR. 9 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES								
22	LICENSE PLATE # ATB6088 STATE WA VIN# 2HKYF18477H507456								
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41							
24		1 42							
	REGISTERED OWNER INFO. OWNED BY DRIVER VEHICLE NO. 2 SHADE IN DAMAGED AREA LIABILITY INSURANCE IN SURANCE CO PERSONAL LINES 55PH.J739513355816 REGISTERED OWNER INFO. OWNED BY DRIVER VEHICLE NO. 2 SHADE IN DAMAGED AREA 2 3 4 POLICY # 9 TOP 9 TOP								
25	N EFFECT VE NO CITATION # CHARGE								
26	OFFICER'S NAME (PRINT) BADGE OR ID # AGENCY WA0311900 R. RUTHERFORD 0130 WA0311900								
	PART A 3000-345-159 R (7/06)								





CORRECTION

CASE #

REPORT NO.

E577804

2016-00016828

		ADDIT	TONAL PERSO	NS INVOLVE	ED (PASSEN	GERS AND	OR WITI	NESSI	ES ONLY)				
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY) NAME (LAST, FIRST, MIDDLE INITIAL) CARDONA MARVELLA G													
ADDRESS & PHONE #	2 W. CASINO #216	EVERETT V	VA 98204 425422	9341			SE	×F	D.O.B. MMDDYYYY 07		21 _		1978
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HE	LMET JSE	INJURY CLASS		NATURE OF IN	JURIE	3
NAME (LAST, FIRST, MIDDLE	INITIAL) LOH	NES AMB	ER M										
ADDRESS & PHONE # 1425 128TH DRIVE NE LAKE STEVENS WA 98258 4252637688 SEX F D.O.B. MDDYYYY 08 - 11							11 _		1986				
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT		LMET JSE	INJURY CLASS		NATURE OF IN	JURIE	5
NAME (LAST, FIRST, MIDDLE	INITIAL)												
ADDRESS & PHONE #							SE	x	D.O.B. MMDDYYYY		_		
PASSENGER	WITNESS UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HE	LMET JSE	INJURY CLASS		NATURE OF IN	JURIE	3
				N/	ARRATIV	Έ							
DACCENCED - WITNESS - LINIT # DEAT LABBAC DECTD FIRST TELLVIET TINJUNT													
CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)													
R. RUTHERFORD INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET O8-26-16 09:57 AM DATED PLACE SIGNED													
APPROVED BY BOB SUMMERS			UNIT OR DIST.	DEI	DATED		DATE 8/		CE SIGNED 16 3:29:21 PM	,			
BADGE OR ID #	0130	ORI#	WA0311900			TIME POLICE [DISPATCHEE	12:	37 PM	TIME P	OLICE ARRIVE	D 1 :	04 PM

REPORT NO. E577804

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DATE AND TIME OF COLLISION 08/25/16 12:37

